

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		69607	7/12/00
O.I.P.E. CLASSIFIER		43	7/12/00
FORMALITY REVIEW	JO	66959	8-31-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
0	✓
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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41	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
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100	✓

Claim	Date
Final Original	
101	✓
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146	✓
147	✓
148	✓
149	✓
150	✓

If more than 150 claims or 10 actions  
staple additional sheet here

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